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Notes from the Washington State Department of Health, Tobacco Prevention and Control Program

What's new on the tobacco front?

Regional contractor meetings coming soon – see important meeting materials in this newsletter

The winter regional contractor meetings are almost here, and to help you prepare, some of us from the state Tobacco Prevention and Control Program have included program updates in this newsletter. The updates are intended to replace those often given at the meetings. This should leave more time at the meetings for questions and discussion. The topics covered in the updates include cessation, working with minority groups, and the Implementation Advisory Committee. Julia Dilley will email contractors background information about program evaluation before the meetings.

For further information about the meetings call Marie Hruban at (360) 236-3730 or email Marie.Hruban@doh.wa.gov

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Program releases year-end report

The Tobacco Prevention and Control Program recently published a summary of its first year-and-a-half of activity. The 19-page report highlights the progress the program and its partners have made since the program's creation in July 2000. The "2001 Report: Building a Solid Foundation for a Healthier Washington" is available from the program or on the program web site at <http://www.doh.wa.gov/tobacco>.

For further information contact Larry Champine at (360) 236-3614 or email Larry.Champine@doh.wa.gov

New quit line web site launched

Washington's toll-free tobacco quit line has expanded its services by introducing the web site Quitline.com. The new site gives those thinking about quitting tobacco use a chance to explore quit line services before calling the line. Visitors to the site can hear a sample call, meet quit line

operators, read the stories of quit line users who successfully quit, and learn more about the quitting process.

“Calling the quit line is a big step for many people,” says Karen Krueger, the statewide program’s cessation coordinator, “The web site provides an anonymous, safe place people can visit to find out what to expect when they call the quit line.”

Quitline.com was created by the statewide tobacco program’s public relations contractor, MWW Savitt.

For further information contact Susan Zemek at (360) 236-3634 or email

Susan.Zemek@doh.wa.gov

Plan to attend statewide contractor’s conference in March

Mark March 27-28 on your calendar. On those dates the Department of Health will hold its annual statewide Tobacco Contractors’ Conference at the Sea-Tac Marriott. Secretary of Health Mary Selecky will open the conference, which will feature keynote addresses on achieving prevention goals by changing social attitudes and providing service appropriate to diverse cultures, as well as sessions on social marketing, secondhand smoke, Oregon’s school tobacco program, marketing the quit line to health care providers, the Master Settlement Agreement, communications methods for promoting prevention, and CATALYST.

For further information contact Marie Hruban at (360) 236-3730 or email

Marie.Hruban@doh.wa.gov

Introducing Tamatha!

The Tobacco Prevention and Control Program recently added a full-time staff member to work on cessation. Her name is Tamatha Thomas-Haase. Tamatha comes to the program after serving in the Washington State Office of Crime Victims Advocacy for nearly three years. While there, Tamatha acted as a program coordinator for the Sexual Assault Services Program and was responsible for contract management, training, and technical assistance to non-profit agencies serving victims of sexual violence. With 11 years in the sexual assault treatment and prevention field, she has worked at the community level as a volunteer, client advocate, prevention educator, and administrator before making a move to state service. She currently is pursuing a master’s degree in public administration and has fun coaching girls soccer and running with her dog, Molly.

Contractor meeting background information

Implementation Advisory Committee meets for first time

The state program’s newly formed Implementation Advisory Committee hit the ground running on January 11 with discussions of the program budget, local program use of tobacco industry funding, performance-based contracts, and the youth quit line. The 17-member committee of four youth, two non-profit, two school, one tribal and eight community representatives was formed to:

- Provide input to the state program manager and staff on issues of program implementation.
- Encourage collaboration between the state program and its community partners.
- Increase communications among community partners including tribes, Educational Service Districts, and school districts, local health jurisdictions, and community-based agencies.

Following are the highlights of the first meeting's discussion.

How to spend the potential funding increase. The committee discussed possible uses of the funding increase that is anticipated as a result of the passage of Initiative 773. The initiative mandates an increase in the program's yearly budget to \$26.2 million. Program manager Terry Reid asked committee members to list the activities they would choose to implement or enhance in each of the three categories. The committee suggestions for each category were:

Activities identified in the tobacco plan, currently implemented but underfunded

- Fund at least one full-time staff person in smaller counties
- Youth and adult cessation — classes and training
- Secondhand smoke – all activities
- Cessation/Nicotine Replacement Therapy

Activities identified in the tobacco plan, but unfunded

- Enforcement of tobacco laws
- Diversion programs in smaller counties
- Prevention programs aimed at 18-24 year olds
- Support funds for media literacy as part of school curriculum

Activities not included in the current tobacco plan

- Extend school cessation program to grades beyond 5-9
- Provider trainings for all health care providers in county – have only identified providers working with pregnant mothers
- Increase youth awareness of what is happening at the state and national level (training opportunities)
- Public awareness activities with college age/young adults
- Smokeless tobacco prevention

Tobacco industry funds. The committee discussed inserting a clause in Department of Health contracts prohibiting tobacco contractors from accepting anything of value from the tobacco industry. The majority of committee members favored gradually moving toward a contract change combined with education and evaluation of impact. The committee will continue to discuss this issue at its next meeting.

Performance-based contracts. The state program will develop contract monitoring guidelines that its contract managers will use when providing technical assistance and performing site visits. The committee asked that the tool be simple and user-friendly. They expressed the need to avoid another layer of paperwork for the contractors, and asked that the tool be more than just an audit. The committee suggested that contract monitoring should identify areas of need, and that the state program should communicate results and overall outcomes to contractors in a positive,

helpful manner. Four members volunteered to provide review and advice during guideline development.

Youth quit line. The four youth members met outside of the full committee to provide a youth perspective on development of the youth quit line. They discussed potential names for the quit line, and ways to make the line user friendly. The youth members made a number of suggestions for making a youth quit line successful. They included staffing the line with young people, offering information about the youth quit line on the internet, developing youth quit line posters for high schools, and promoting the line through give away items like lollipops marked with the quit line number.

Next Meeting: March 26, 2002

For further information contact Marie Hruban at (360) 236-3730 or email Marie.Hruban@doh.wa.gov

Disparities Update

Reducing the unusually high rates of tobacco use found in certain populations is one of the Center for Disease Control's top priorities, but when it found that states were doing little to identify and address these disparities among populations, it created a grant program to prompt states to try new approaches to the problem.

Last year, the Centers for Disease Control and Prevention awarded 14-month grants to 11 states, including Washington, to encourage grantees to pilot strategies for reducing disparities. The goals of the pilot projects are to:

- Identify the disparities or gaps, across their state, that lead to a greater risk of tobacco use in underserved communities or populations.
- Identify the capacity that must be developed by the Department of Health and others to eliminate these gaps.
- Identify culturally appropriate activities that could help reduce tobacco use in various underserved communities.

The first phase of Washington's project has been completed. A 22-person Cross Cultural Workgroup on Tobacco has been recruited and met six times since April. Additionally, the Cross Cultural Health Care Program, under contract with the Department of Health, has completed an extensive review of the literature to determine what is and is not known about tobacco-related disparities and how to address them.

Phase 2 will include a two-part community assessment, to be conducted between March 1 and June 30, 2002. The assessment phase will begin with key informant interviews in African American, American Indian, Asian American-Pacific Islander, Latino, and sexual minority communities. Either community-based organizations serving each community or the Cross Cultural Health Care Program will conduct the interviews. The assessments will characterize each community's capacity, readiness, strengths, weaknesses, opportunities, and threats related to

tobacco control. Additional assessments will be performed, as needed, to gain a better understanding of factors that contribute to disparities such as geography (urban vs rural), income, and education. During the second part of the assessment phase these communities will review the current tobacco plan, and suggest adjustments to the plan that would more effectively reduce tobacco use in underserved communities.

In late summer, the Cross Cultural Workgroup will work with the Department of Health and its contractors to develop and recommend a statewide, strategic plan to reduce disparities. It will include a description of the specific activities to be included in the department's work plan and budget for State Fiscal Year 2004. Once the strategic plan is completed, the work group will develop strategies for promoting the plan to a wide variety of stakeholder groups and key leaders. The project will end in December 2002. The Department of Health most likely will support a few pilot projects during State Fiscal Year 2003 to gain a better understanding of the effectiveness of promising approaches in reducing disparities in Washington State.

For further information, contact Dave Harrelson at (360) 236.3685 or email David.Harrelson@doh.wa.gov

Cessation advance materials for regional meeting

Adult quit line

- Call volume and use of nicotine replacement therapy are operating at capacity.
- County-level quarterly quit line reports are available for July 2000 –December 2001. Contact Craig Parker at (360) 236-3748 or Craig.Parker@doh.wa.gov for a copy. The July 2000-October 2001 reports are posted on the department's tobacco contractor web site at http://www.doh.wa.gov/tobacco/contractors_tools.htm under "Cessation Resources."
- New quit line ads are being developed and will be released early this summer. Content will be based on feedback from focus groups done this fall.
- At the March contractor's conference, we will begin training local tobacco program volunteers to market the quit line to their local health care providers. We will contact the agencies that volunteered to assist with this project for input on the training outline and case study examples of successful quit line marketing strategies to physicians. The materials local programs will use to market the quit line are under development.

Additionally, Glaxo Smith Kline has volunteered to help market the quit line to physicians. Glaxo Smith Kline representatives will market the quit line during their routine physician business calls. Beginning in April, Glaxo Smith Kline representatives will contact local tobacco control coordinators to discuss visits with selected physicians. This will involve 1,200 physicians in the Puget Sound area and around Spokane in eastern Washington. The goal is to increase reach to physicians and enhance, not replace, local quit line marketing efforts. The initial marketing effort will last between six and 12 months.

Maternity Support Services and Women Infants and Children programs will counsel low-income pregnant women

Under a plan now being developed, more than 1,200 local Maternity Support Services (MSS) and Women Infant and Children (WIC) program staff will be trained to assist and advise low-income tobacco using pregnant and parenting women and their families. In addition to helping pregnant women quit using tobacco, staff will be trained to help mothers reduce their children's exposure to secondhand smoke. Training probably will start in July and run through October at 30 locations throughout the state. A statewide training work group with representation from ten communities is developing the plan. County tobacco control coordinators will be asked to maintain contact with local MSS and WIC agencies to keep them up to date on new resources and ensure that they maintain adequate supplies of materials. Stay tuned for more details. Local staff are encouraged to attend the training that will be held closest to their community.

Resource Center will provide training in the "brief intervention"

Negotiations are still underway with the apparently successful bidder for the Resource Center contract to provide training in the "brief intervention for smoking cessation." The "brief intervention" is a 5- to 15-minute cessation counseling session, in which the counselor determines the client's smoking status, provides them with personalized advice about quitting, determines if the client is willing to quit within 30 days, and provides resource to help the client quit. Training will be offered in conjunction with consultation on ways to coordinate and track the implementation of the brief intervention within a health care system. If your community has specific training needs in the next few months, please contact Tamatha Thomas-Haase so that the department can assist you before the opening of the Resource Center. Tamatha can also provide you with a review copy of the "hands-on" curriculum workbook adapted from work done in Arizona.

Medicaid coverage for intensive tobacco cessation counseling and Zyban

The Medical Assistance Administration (MAA) has issued new guidelines that permit tobacco dependent, pregnant women covered under Fee-For-Service to receive a maximum of ten smoking cessation counseling sessions per pregnancy. Additionally, the new guidelines allow health care providers to prescribe Zyban, if appropriate, for women 18 years of age and older. MAA does not cover any nicotine replacement therapies.

The new guidelines apply only to women who receive Medicaid services during pregnancy or up to two months postpartum. MAA will reimburse eligible fee-for-service maternity care providers for including smoking cessation counseling as part of office visits made during pregnancy or shortly after. Providers eligible for reimbursement are physicians, Advanced Registered Nurse Practitioners, midwives, or physician assistants. Medicaid will not pay for counseling by other types of health care providers. The MAA will cover two levels of counseling: basic counseling (approximately 15 minutes), and intensive counseling (approximately 30 minutes) based upon the Smoking Cessation Intervention for Pregnant Clients from the American College of Obstetrics and Gynecologist using the Five A's of Ask, Advise, Assess, Assist and Arrange.

Tobacco dependent women who are enrolled in a managed care program must have smoking cessation services arranged and referred by their primary care physician. The smoking cessation coverage is included in the managed care organization's capitated reimbursement rate.

Youth Quit Line

News about the Youth Quit Line planning process will be shared at the Regional Meetings.

In the news**States look to tap smokers' habit**

USA Today reports on state tobacco tax increases passed or under consideration.

<http://www.usatoday.com/usatoday/20020114/3768947s.htm>

Tobacco Free Kids rates state funding of tobacco programs

A report issued by the Campaign for Tobacco Free Kids rates use of tobacco settlement funds for tobacco prevention. Washington moved up slightly in the ratings based on its \$17.5 million program budget, with a note that the program is expecting an increase to \$26.2 million per year in accordance with Initiative 773.

<http://tobaccofreekids.org/Script/DisplayPressRelease.php3?Display=433>

Study shows comprehensive tobacco programs works

Stan Glantz has published a study of tobacco programs in Arizona, Florida, Massachusetts, and Oregon that indicates well-funded tobacco programs are effective. http://www.ama-assn.org/sci-pubs/msjama/articles/vol_286/no_21/jms1205012.htm

Questions, comments submissions

If you are planning a training or event in your area that you would like to make known to the state tobacco prevention community, you are welcome to submit an announcement to this newsletter. Comments on the newsletter are always welcome. Send your announcement or comments to larry.champine@doh.wa.gov or call (360) 236.3614.